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U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECULARI 02

PURSUANT TO REGULATI 02

SECTION 4(6), AND/OF

UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering (check if this is an amendment and name has changed, and indicate change.) Membership Interests of Kingdom Trading, LLC Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Kingdom Trading, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) umber (Including Area Code) 219 Georges Hideaway, Simpsonville, South Carolina 29681 Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Hedge Fund Type of Business Organization **PROCESSED** corporation limited partnership, already formed other (please specify): Limited Liability Company JUL 1 7 2002 business trust limited partnership, to be formed THOMSON FINANCIAL Month Year X Actual ☐ Estimated Actual or Estimated Date of Incorporation or Organization: May 15, 2002 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: Ð CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDENTIFIC	ATION DATA		
2. Enter the information requested for the following:				
· Each promoter of the issuer, if the issuer has been organ	ized within the past five year:	s.		
· Each beneficial owner having the power to vote or dispos	e, or direct the vote or dispos	sition of, 10% or ı	more of a class of equity securities of the issuer;	
· Each executive officer and director of corporate issuers a	and of corporate general and	managing partne	rs of partnership issuers; and	
· Each general and managing partner of partnership issue	rs.			
Check Box(es) that Apply: 🗵 Promoter 🗵 Beneficial Owner	Executive Officer	☐ Director	凶 General and/or Managing Partner	
Kingdom Advisors, LLC Full Name (Last name, first, if individual)	· · · · · · · · · · · · · · · · · · ·			
219 Georges Hideaway, Simpsonville, South Carolina 29681				
Business or Residence Address (Number and Street, City, State,	Zip Code)			
Check Box(es) that Apply: 🗵 🗖 Promoter 🗵 Beneficial Owner	r Executive Officer	☐ Director	☑ General and/or Managing Partner	
Robert J. Rogers (Managing Member of Kingdom Advisors, LLC)			
Full Name (Last name, first, if individual)				
219 Georges Hideaway, Simpsonville, South Carolina 29681 Business or Residence Address (Number and Street, City, State,	7in Code)			
dustness of Residence Address (Number and Street, Chy, State,	Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name, first, if individual)				
Business or Residence Address (Number and Street, City, State,	Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name, first, if individual)			Market and the second s	
Business or Residence Address (Number and Street, City, State,	Zin Code)			
Dusiness of Residence Address (Fulliber and Street, City, State,	zip coucy			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name, first, if individual)				
Business or Residence Address (Number and Street, City, State,	7in Code)	············		
business of Residence Address (Fullion and Street, City, State,	zip coucy			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name, first, if individual)	W			
Business or Residence Address (Number and Street, City, State,	Zip Code)	`		
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name, first, if individual)				
Business or Residence Address (Number and Street, City, State,	Zip Code)			
(Use blank she	et, or copy and use additiona	l copies of this sh	eet, as necessary.)	

Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?	50,000 s No
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer,	50,000 s No
2. What is the minimum investment that will be accepted from any individual?	s No
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you may set forth the information for that broker or dealer only.	
Full Name (Last name, first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]	
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	
Full Name (Last name, first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	-
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]	
IL]	
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	
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Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
_	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]	
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

^{*}The offering provides for the use of a registered broker dealer to assist in the offering if the managing member deems it necessary. There have been no broker dealers engaged or terms negotiated at this time.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 🔲 and indicate in the columns below the amounts of the				
	securities offered for exchange and already exchanged.	Aggregate			Amount
	Type of Security	Offering Price	e	Ai	ready Sold
	Debt		_	\$	N/A
	Equity	\$ <u>N/A</u> _	-	s	N/A
				•	27.64
	Convertible Securities (including warrants)		_	»	N/A
	Partnership Interests		_	*—	N/A 101,000,000
	Total		_		101,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.	23,000,00	<u>,,,</u>	³	101,000,000
	amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Accredited Investors	Number Investors	2	Dol	ggregate lar Amount Purchases 101,000
	Non-Accredited Investors		0	s	0
	Total (for filings under Rule 504 only)	N/A	_	s	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the tweive (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.				D. II
	Type of offering	Type of Security		Ап	Dollar nount Sold
	Rule 505.	•		\$	N/A
	Regulation A	N/A	_	S	N/A
	Rule 504	N/A		s	N/A
	Total	<u>N/A</u>	_	\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offer. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs		X	\$	2,500
	Legal Fees		X	S	27-000

Engineering Fees

Total

 \boxtimes

X

7,500

3,000

40,000

0

^{*}The offering provides for the use of a registered broker dealer to assist in the offering if the managing member deems it necessary. There have been no broker dealers engaged or terms negotiated at this time.

C. OFFER	RING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS
b. Enter the difference between the aggregate offein response to Part C—Question 4.a. This differen	ring price given in response to Part C—Question 1 and total expenses furnished to the "adjusted gross proceeds to the issuer." \$
If the amount for any purpose is not known, furi	oceeds to the issuer used or proposed to be used for each of the purposes shown. oish an estimate and check the box to the left of the estimate. The total of the ceeds to the issuer set forth in response to Part C—Question 4.b. above. Payments to Officers, Directors Affiliates To Others
Purchase of real estate	S
Construction or leasing of plant buildings and Acquisition of other businesses (including the	facilities
Repayment of indebtedness Working capital	
Column Totals	□ \$ 0 ★ \$ 24,960,000 □ \$ 0 ★ \$ 24,960,000 ★ \$ 24,960,000 ★ \$ 24,960,000
	D. FEDERAL SIGNATURE
The issuer has duly caused this notice to be signed by the issuer to furnish to the U.S. Securities and Exchange oparagraph (b)(2) of Rule 502. Issuer (Print or Type) Kingdom Trading, LLC	be undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by ge Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant Signature By: Kingdom advisors, LLC Its: Managing Member
No. (C) (Delice To)	By: Moral Males
Name of Signer (Print or Type) Robert J. Rogers	Title of Signer (Print or Type) Managing Member of Kingdom Advisors, LLC as the Managing Member of the Issuer
Nobel Co. Nogel 3	
	E. STATE SIGNATURE
. Is any party described in 17 CFR 230.252(c), (d), ((e) or (f) presently subject to any of the qualification provisions of such rule? Yes No See Appendix, Column 5, for state response.
The undersigned issuer hereby undertakes to furnish by state law.	sh to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required
	s familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state he issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
he issuer has read this notification and knows the con	ntents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.
Issuer (Print or Type)	Signature By: Kingdom Advisors, LLC Its: Managing Member
Kingdom Trading, LLC	By: Dobert & Jess 6/14/02
Name (Print or Type)	Title (Print or Type)
Robert J. Rogers	Managing Member of Kingdom Advisors, LLC as the Managing Member of the Issuer
instruction: Print the name and title of the signing representative un nanually signed must be photocopies of the manually	nder his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies no signed copy or bear typed or printed signatures.
Intentional miss	ATTENTION statements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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1	Intend to sell to non-accredited investors in State (Part B-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK				_						
AZ				_					<u> </u>	
AR									ļ	
CA				_						
co								ļ	ļ <u>.</u>	
СТ								ļ	ļ <u> </u>	
DE									<u> </u>	
DC					-				<u> </u>	
FL	X		LLC Interest						x	
GA					· .					
HI			<u> </u>					ļ		
ID										
IL		.,								
IN			,						_	
IA										
KS		ļ								
KY										
LA										
ME										
MD	X	<u>.</u>	LLC Interest						<u>x</u>	
MA	X		LLC Interest			<u></u>			x	
MI		ļ								
MN										
MS										
МО										
МТ										
NE										
NV										
NH										
NJ										
NM										
NY	X		LLC Interest						X	
NC	x		LLC Interest						X	
ND										

1	Intend to non-ac investors	to sell ecredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
ОН									
ок									
OR									
PA				_					
RI									
SC	x		LLC Interest	2	\$101,000				x
SD									
TN				_					
TX									
UT									
VT									
VA				_					
WA									
wv		<u> </u>							
wi									
WY									
PR									